

Exhibit 300: Capital Asset Summary

Part I: Summary Information And Justification (All Capital Assets)

Section A: Overview & Summary Information

Date Investment First Submitted: 2010-03-19
Date of Last Change to Activities: 2012-06-21
Investment Auto Submission Date: 2012-02-27
Date of Last Investment Detail Update: 2011-09-16
Date of Last Exhibit 300A Update: 2012-02-27
Date of Last Revision: 2012-06-21

Agency: 029 - Department of Veterans Affairs **Bureau:** 00 - Agency-Wide Activity

Investment Part Code: 01

Investment Category: 00 - Agency Investments

1. Name of this Investment: Medical 21st Century Registries

2. Unique Investment Identifier (Ull): 029-555555109

Section B: Investment Detail

- 1. Provide a brief summary of the investment, including a brief description of the related benefit to the mission delivery and management support areas, and the primary beneficiary(ies) of the investment. Include an explanation of any dependencies between this investment and other investments.**

Our patient registries are an organized system that collect and store uniform data (clinical and other) to evaluate specified outcomes for the patient population defined by a particular disease, condition, or exposure, and supports multiple research, clinical, and policy purposes. These investments are important for population surveillance with the ultimate goal of improving care for these defined patient populations. The Registry Program is composed of several highly visible projects that support specific registries as mandated by laws, regulations or VA mandates. These registries are used to coordinate care, track longitudinal outcomes in order to facilitate research and develop best practices. For example, the Traumatic Brain Injury Registry is used in screening for traumatic brain injuries in Operation Enduring Freedom/Operation Iraqi Freedom (OEF/OIF) veterans, providing comprehensive follow up evaluations to veterans with positive screens, and tracking care for these Veterans. The Veterans' Implant Tracking and Alert System (VITAS) provides the critical ability to track Veterans with implants and alert them in the case of a recall. These and other component parts of the Registries Program area support the population-specific data needs of the enterprise and the healthcare needs of veterans, including, but not limited to Clinical Case Registries (HIV and Hep-C), Oncology Tumor Registry, Embedded Fragment Registry, and Eye Trauma Registry. This exhibit also includes the converged registries solution which is an enterprise platform to facilitate the standardization of registries development and allow for

quick reaction to new registries requests. This investment will provide service to the veteran through improved healthcare outcomes for those veterans with conditions monitored by the registries. It supports various strategic goals for public health and healthcare delivery and responds to mandates including those from Congress and the President arising from Overseas Contingency Operations. The Registries Program has is dependent upon the Medical 21st Century Development Core OMB Exhibit and the Corporate Data Warehouse (CDW), VistA facility databases, and the Austin Information Technology Center (AITC). The registries program retrieves data from applications supported by the Medical 21st Century Development Core OMB Exhibit, the CDW, VistA databases, and databases housed at the AITC.

2. How does this investment close in part or in whole any identified performance gap in support of the mission delivery and management support areas? Include an assessment of the program impact if this investment isn't fully funded.

The registries developed, maintained, and sustained by this investment are used to identify Veterans that belong to a certain subset of the overall Veteran Populations. The registries software collects and stores data that is used to track treatment and outcomes of these populations. The software is also used for a variety of reporting purposes including reports required by VA management, Congress, and national organizations. If this investment is not funded, the ability to identify, track, and report on specific populations within the VA such as Veterans with implant, Traumatic Brain Injuries, embedded fragments, eye injuries, cancer, Hep-C, HIV, breast cancer, and other conditions would not be possible. Failure to support these efforts may affect VA's ability to identify and track the health problems, such as those associated with toxic embedded fragments, leading to a reduced capability to ensure that proper care is being administered to this, and all other patient populations supported by a registry. In addition to developing and sustaining specific registries for the VA, this investment is responsible for developing the Converged Registries Solution which will allow for the quick reaction to future registries requests and provide a means for the VA to satisfy these requests in a more cost effective manner. The converged registries solution will also standardize data where appropriate and allow for data sharing between registries into the future.

3. Provide a list of this investment's accomplishments in the prior year (PY), including projects or useful components/project segments completed, new functionality added, or operational efficiency achieved.

Embedded Fragments Registry (EFR) v 2.0/3.0 allowing tracking of Veterans returning from Afghanistan and Iraq with embedded fragments. Defense and Veteran's Eye Injury (DVEIR) Data Store v 2.0/3.0 allows the collection of data relevant to Veterans' eye injuries. Traumatic Brain Injury Registry (TBI) v 1.0 facilitates the identification and tracking of Veterans with Traumatic Brain Injuries. Clinical Case Registries release 12 - 15 maintained and enhanced the software used to identify, track, and report Veterans with Hep-C and HIV. Oncology Tumor Registry patches 51, 52, and 53 sustained the current OncoTraX software and updated the software to national cancer registry standards. Developed and released the initial Converged Registries solution in support of the EFR, DVEIR, and TBI and to facilitate the rapid development of future registries. Release of Veterans Implant Tracking and Alert System 2.0 for identifying Veterans with implants and providing a recall mechanism.

4. Provide a list of planned accomplishments for current year (CY) and budget year (BY).

For CY 2012: Embedded Fragment Registry (EFR) v 4.0 will allow the Toxic Embedded Fragment Surveillance Center lab results to be automatically uploaded into the registry. Defense and Veteran's Eye Data Store (EYE) v 4.0 will allow VA eye injury data to be sent to the Defense and Veterans' Eye Injury Registry constructed by the Department of Defense. An ad-hoc reporting capability will be developed for the converged registries solution allowing Traumatic Brain Injury Registry (TBI), EFR, EYE, and Oncology users to create custom queries to better understand the data collected on their cohort. The Oncology Tumor Registry will be moved into the enterprise registries platform, converged registries solution, allowing for use of standard and data sharing to be implemented. Construction on a Breast Cancer Registry will commence. The Clinical Case Registries will add a Quality of Life module which will enhance the lives of those Veterans with HIV and Hep-C. Complete development and deployment of VITAS. FOR BY 2013: EFR will be updated to allow import fragment analysis data from the Department of Defense. Defense and Veteran's Eye Data Store will be maintained to ensure the continued usability of the application. Additional functionality will allow TBI to receive data from the Department of Defense. The Oncology Tumor Registry will be maintained to national cancer registry standards. Clinical Case registry will be updated with appropriate LO INC codes, pharmaceutical information, and IC-10/COPT codes. Breast Cancer Registry development will continue.

5. Provide the date of the Charter establishing the required Integrated Program Team (IPT) for this investment. An IPT must always include, but is not limited to: a qualified fully-dedicated IT program manager, a contract specialist, an information technology specialist, a security specialist and a business process owner before OMB will approve this program investment budget. IT Program Manager, Business Process Owner and Contract Specialist must be Government Employees.

2010-02-24

Section C: Summary of Funding (Budget Authority for Capital Assets)

1.

Table I.C.1 Summary of Funding

	PY-1 & Prior	PY 2011	CY 2012	BY 2013
Planning Costs:	\$0.0	\$0.0	\$0.0	\$0.0
DME (Excluding Planning) Costs:	\$6.8	\$4.9	\$4.2	\$3.3
DME (Including Planning) Govt. FTEs:	\$1.4	\$1.2	\$1.0	\$0.8
Sub-Total DME (Including Govt. FTE):	\$8.2	\$6.1	\$5.2	\$4.1
O & M Costs:	\$0.0	\$2.0	\$2.4	\$2.4
O & M Govt. FTEs:	\$0.0	\$0.4	\$0.3	\$0.6
Sub-Total O & M Costs (Including Govt. FTE):	0	\$2.4	\$2.7	\$3.0
Total Cost (Including Govt. FTE):	\$8.2	\$8.5	\$7.9	\$7.1
Total Govt. FTE costs:	\$1.4	\$1.6	\$1.3	\$1.4
# of FTE rep by costs:	11	12	12	12
Total change from prior year final President's Budget (\$)		\$-1.7	\$5.3	
Total change from prior year final President's Budget (%)		-17.04%	208.86%	

2. If the funding levels have changed from the FY 2012 President's Budget request for PY or CY, briefly explain those changes:

Further review of the combined registries' efforts has resulted in a significant reduction of the projected costs, as well as the identification of new requirements for "quick reaction registries" to support additional needs of the veteran population. The new and evolving registry needs require us to re-plan our efforts in a cost-efficient way, while improving our support of healthcare tracking and outcome improvements for the veterans supported by each of our evolving registries.

Section D: Acquisition/Contract Strategy (All Capital Assets)

Table I.D.1 Contracts and Acquisition Strategy

Contract Type	EVM Required	Contracting Agency ID	Procurement Instrument Identifier (PIID)	Indefinite Delivery Vehicle (IDV) Reference ID	IDV Agency ID	Solicitation ID	Ultimate Contract Value (\$M)	Type	PBSA ?	Effective Date	Actual or Expected End Date
Awarded	3600	VA11810F0338	GS06F0542Z	4730							

2. If earned value is not required or will not be a contract requirement for any of the contracts or task orders above, explain why:

This contract is for outsourced development work but the dollar value is less than \$20M, the contract is not high-risk, and the benefits do not exceed the cost to VA. As such, the contractor is not required to have an EVMS per VA Directive 6061. However, as this contract supports a major IT development effort, the contractor will support VA's EVMS by providing the necessary schedule, and cost performance information.

Exhibit 300B: Performance Measurement Report

Section A: General Information

Date of Last Change to Activities: 2012-06-21

Section B: Project Execution Data

Table II.B.1 Projects

Project ID	Project Name	Project Description	Project Start Date	Project Completion Date	Project Lifecycle Cost (\$M)
1003100604	Traumatic Brain Injury Registry (TBI)	Provides annual IT Maintenance and sustainment support for the TBI screening and evaluation registry. This registry is required by the Presidential task force on Returning Global War on Terror Heroes, as stated in the Global War on Terror(GWOT) report(recommendation P-3) as well as Public Law 110-181 NDAA 2008 TBI Section 1704. This registry promotes delivery of quality care by ensuring OEF/OIF Veterans are screened for TBI, receive timely follow up, evaluations and on-going treatment.			
1003100605	Clinical Case Registry (CCR)	Maintenance of the Clinical Case Registries which tracks the care and outcomes for Veterans with HIV and Hep-C.			
1003260619	Military Eye Vision Injury Registry	Provides annual IT maintenance/sustainment to the Defense and Veterans Eye Injury Registry (DVEIR) including the VA Eye Injury Data Store. This			

Table II.B.1 Projects

Project ID	Project Name	Project Description	Project Start Date	Project Completion Date	Project Lifecycle Cost (\$M)
		registry is mandated by PL110-181 which requires data to be collected on Service Members sustaining eye injuries and be shared bi-directionally between DoD and VA to ensure the coordination of ongoing eye care and visual rehabilitation benefits and services by the VA.			
1004010607	Oncology Tumor Registry (ONC)	The VAs tumor registry data collection tool, is in use at 140 medical centers diagnosing and/or treating patients with cancer. To remain current, given the numerous changes being released by the national standards setters, the OncoTrax registry package must be updated on an ongoing basis. VHA Directive 2003-034 requires that all medical centers diagnosing and/or treating patients with cancer must have a cancer registry and must report their data to the VA Central Cancer Registry.			
1008200603	Veterans Implant Tracking and Alert System (VITAS)	The development of VITAS will address the Veterans Health Administration (VHA) request for a national solution to improve the process of tracking manufactured and/or processed implant devices and tissues with the ability to identify and locate patients quickly in the event of a recall and to serve clinical needs at the point of care.			
1101070606	EVH National Homeless Registry - HMIS (Homeless Management Information System)	The Homeless Management Information System (HMIS) is an integral part of building a Homeless Registry within the VA. This Project aims to collect			

Table II.B.1 Projects

Project ID	Project Name	Project Description	Project Start Date	Project Completion Date	Project Lifecycle Cost (\$M)
		Veteran homeless data from what is called Continuum of Care (CoC) and provide the VA an integrated view of Veteran homelessness. The Project specific to HMIS Registry is the build of an HMIS Repository. The establishment of a national Homeless Registry, which the HMIS feeds into, is key to the Initiatives goal defined Five Year Plan to End Homelessness Among Veterans.			
1101130612	EVH National Registry - Web Based Management Models	This is to support development of a Housing and Urban Development-Department of Veterans Affairs Supported Housing (HUD-VASH) Toolkit. This is also to support other Homeless Programs requirements to establish toolkits, such as the Supportive Services for Veteran Families Program. A Homeless Toolkit would facilitate the transition to permanent supported housing and use of best practices by providing access to both general and program-specific information to providers and eventually to Veterans. Currently, the system used to process the payments from the VAMCs (VA Medical Centers) to the agencies does not capture the necessary information to meet these requirements.			
1102180603	Embedded Fragment Registry	This project will provide annual IT maintenance and sustainment support for the Embedded Fragment Registry to maintain functionality and operation. This includes support of the registry			

Table II.B.1 Projects

Project ID	Project Name	Project Description	Project Start Date	Project Completion Date	Project Lifecycle Cost (\$M)
		database, user interface, application testing, reporting and VistA components (clinical reminders). This registry is required by the Presidential Task Force on Returning Global War on Terror Heroes (GWOT recommendation P -7) in support of the VA Toxic Embedded Fragment Surveillance Center (TEFSC). This registry ensures OEF/OIF veterans are screened for embedded fragments and receive follow up care and long term surveillance.			
1109130720	EVH National Homeless Registry - EVH Analytical Tool	The EVH (Eliminate Veterans Homelessness) Analytical Tool is to assist in determining the size of various homelessness programs based on various measures such as unemployment, economic dislocation, deployment, etc .With the overall objective of ending Veterans homelessness, a tool like the EVH Analytical Tool is necessary to be proactive in determining the size of programs and thus able to address the needs of the homeless Veteran. OIT deliverable are servers to support this tool.			
1010190604	Breast Cancer Clinical Case Registry	This project willdevelop a breast cancer clinical case registry in order to monitor and track breast cancer and diagnostic test result, facilitate coordination of care, and improve management and timeliness to treatment for the Office of Public Health and Environmental Hazards and the Women Veterans Health Strategic Health Care Group			

Table II.B.1 Projects

Project ID	Project Name	Project Description	Project Start Date	Project Completion Date	Project Lifecycle Cost (\$M)
		.Currently there is no system in place inthe Computerized Patient Record System (CPRS) that has the capacity to identify, monitor and track all women with normal or abnormal mammogram results and assess sequential milestones in the diagnostic work up and treatment.			

Activity Summary

Roll-up of Information Provided in Lowest Level Child Activities

Project ID	Name	Total Cost of Project Activities (\$M)	End Point Schedule Variance (in days)	End Point Schedule Variance (%)	Cost Variance (\$M)	Cost Variance (%)	Total Planned Cost (\$M)	Count of Activities
1003100604	Traumatic Brain Injury Registry (TBI)							
1003100605	Clinical Case Registry (CCR)							
1003260619	Military Eye Vision Injury Registry							
1004010607	Oncology Tumor Registry (ONC)							
1008200603	Veterans Implant Tracking and Alert System (VITAS)							
1101070606	EVH National Homeless Registry - HMIS (Homeless Management Information System)							
1101130612	EVH National Registry - Web Based Management Models							
1102180603	Embedded Fragment Registry							

Activity Summary

Roll-up of Information Provided in Lowest Level Child Activities

Project ID	Name	Total Cost of Project Activities (\$M)	End Point Schedule Variance (in days)	End Point Schedule Variance (%)	Cost Variance (\$M)	Cost Variance (%)	Total Planned Cost (\$M)	Count of Activities
1109130720	EVH National Homeless Registry - EVH Analytical Tool							
1010190604	Breast Cancer Clinical Case Registry							

Key Deliverables

Project Name	Activity Name	Description	Planned Completion Date	Projected Completion Date	Actual Completion Date	Duration (in days)	Schedule Variance (in days)	Schedule Variance (%)
1109130720	Project Planning Completed (Defining the requirements for server(s) to be used for the Analytical Tool)	Defining the requirements for the server(s) to be used for the analytical tool	2011-10-31	2011-10-31	2011-10-31	28	0	0.00%
1010190604	Planning State Completed	Analysis and System Design	2012-06-01	2012-06-01		438	-91	-20.78%

Section C: Operational Data

Table II.C.1 Performance Metrics

Metric Description	Unit of Measure	FEA Performance Measurement Category Mapping	Measurement Condition	Baseline	Target for PY	Actual for PY	Target for CY	Reporting Frequency
Percentage of time spent manually entering Registry data expected through improved manual entry methods and automated data import.	Percentage	Customer Results - Timeliness and Responsiveness	Under target	100.000000	75.000000	75.000000	50.000000	Monthly
Percentage of affected Veterans entered into each Registry's defined cohort increases to ensure that these veterans populations are being tracked for care, outcomes, and performance improvement.	Percentage	Mission and Business Results - Services for Citizens	Over target	75.000000	80.000000	80.000000	85.000000	Monthly
Number of Registries using the Converged Registries Solution will increase resulting in cost savings of using a single corporate registries database.	number	Technology - Efficiency	Over target	0.000000	3.000000	3.000000	4.000000	Monthly
Increased usage of standardized data elements (tables) will increase resulting in cost savings of using a single corporate registries database and also improves ability to do data exchange with other data repositories.	Number of tables	Technology - Information and Data	Over target	1.000000	3.000000	3.000000	5.000000	Monthly

Table II.C.1 Performance Metrics								
Metric Description	Unit of Measure	FEA Performance Measurement Category Mapping	Measurement Condition	Baseline	Target for PY	Actual for PY	Target for CY	Reporting Frequency
Percent of data redundancy decreases defined by number of data elements shared between specific registries within the Converged Registries Solution database.	Percentage	Technology - Information and Data	Under target	90.000000	80.000000	80.000000	70.000000	Monthly